

L6 ANSWER 43 OF 55 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS  
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ACCESSION NUMBER: 1998:80627 BIOSIS  
DOCUMENT NUMBER: PREV199800080627  
TITLE: Modulation of chemosensitivity through altered expression  
of cell cycle regulatory genes in cancer.  
AUTHOR(S): Hochhauser, Daniel (1)  
CORPORATE SOURCE: (1) Dep. Clinical Oncol., Royal Free Hosp. Med. Sch.,  
Rowland Hill St., London NW3 2QC UK  
SOURCE: Anti-Cancer Drugs, (Nov., 1997) Vol. 8, No. 10,  
pp. 903-910.  
ISSN: 0959-4973.  
DOCUMENT TYPE: General Review  
LANGUAGE: English

AB Alterations in the expression of genes affecting cell cycle progression  
occur in all human cancers. These may occur either by overexpression of  
genes such as cyclin D1, mutation of regulatory genes such as **p16**  
, or abrogation of checkpoints following DNA damage as in the cases of  
mutation or deletion of the p53 gene. Perturbation of the normal  
functions

of these genes has a profound effect on cellular proliferation,  
differentiation and **apoptosis**. There is increasing evidence that  
such alterations may modulate the cellular **response** to  
**treatment** with chemotherapeutic agents. In many cases genetic  
alterations may induce resistance to drug treatment as in the case of  
mutations of the p53 gene. However, the deregulated expression of cell  
cycle genes may also increase sensitivity to treatment by directly  
altering the expression of the target for chemotherapeutic drugs as in  
the

case of deletion of the retinoblastoma gene. It is crucial to understand  
the interactions between drug mechanisms of action and the genetic  
alterations in cancer to exploit potential areas in which the alterations  
found in tumors may constitute potential vulnerability.

27

ACCESSION NUMBER: 1997:347220 BIOSIS  
DOCUMENT NUMBER: PREV199799646423  
TITLE: Mechanism of apoptotic cell death of human gastric carcinoma cells mediated by transforming growth factor beta.  
AUTHOR(S): Ohta, Shigeki; Yanagihara, Kazuyoshi; Nagata, Kiyoshi (1)  
CORPORATE SOURCE: (1) Shionogi Res. Lab., Shionogi and Co. Ltd., 5-12-4 Sagisu, Fukushima-ku, Osaka 553 Japan  
SOURCE: Biochemical Journal, (1997) Vol. 324, No. 3, pp. 777-782. ISSN: 0264-6021.  
DOCUMENT TYPE: Article  
LANGUAGE: English

AB Human gastric carcinoma cell line HSC-39 has been shown to undergo **apoptotic** cell death in **response** to **treatment** with transforming growth factor beta-1 (**TGF-beta-1**). To understand better the cell death mechanism in this **TGF-beta-1-mediated apoptosis**, we investigated the effect of the expression of **TGF-beta-stimulated clone 22** (TSC-22) on cell death events. **TGF-beta-1** induced TSC-22 gene expression in HSC-39 cells only when the cells had previously been adapted to the serum-free culture conditions required to undergo **TGF-beta-1-mediated apoptosis**. HSC-39 cells transfected with a TSC-22 expression vector showed a significant decrease in cell viability compared with those transfected with a control vector. The cellular events characteristic of **apoptosis**, chromatin condensation and DNA fragmentation were observed only in cells transfected with a TSC-22 expression vector. On immunostaining of the transfected cells, almost every cell that expressed TSC-22 tagged with influenza virus hemagglutinin exhibited the morphology of an **apoptotic** cell. Partial protection from the cell death effect of **TGF-beta-1** on HSC-39 cells was observed when cells were treated with acetyl-L-aspartyl-L-glutamyl-L-valyl-L-aspart-1-al (Ac-DEVD-CHO, an inhibitor specific for CPP32-type protease). Protection against cell death by the transfection of a TSC-22 expression vector was also offered by Ac-DEVD-CHO addition. These results suggest that TSC-22 elicits the **apoptotic** cell death of human gastric carcinoma cells through the activation of CPP32-like protease and mediates the **TGF-beta-1** signalling pathway to **apoptosis**.

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ACCESSION NUMBER: 1993:502098 BIOSIS  
DOCUMENT NUMBER: PREV199396126105  
TITLE: Apoptosis in toremifene induced growth inhibition of human  
breast cancer cells in vivo and in vitro.  
AUTHOR(S): Warri, Anni M. (1); Huovine, Riikka L.; Laine, Aire M.;  
Martikainen, Paula M.; Harkonen, Pirkko L.  
CORPORATE SOURCE: (1) Orion Corp., Farmos Res. Cancer Lab., Biocity, P.B.  
425, FIN-20101 Turku Finland  
SOURCE: Journal of the National Cancer Institute (Bethesda),  
(1993)  
Vol. 85, No. 17, pp. 1412-1418.  
ISSN: 0027-8874.  
DOCUMENT TYPE: Article  
LANGUAGE: English

AB Background: Antiestrogens inhibit the stimulative effects of estrogens on  
breast cancer growth, but the mechanism(s) by which they trigger tumor  
regression are not completely understood. Growth retardation and tumor  
regression can be achieved by enhanced cell death and/or arrested cell  
proliferation. Purpose: Our aim was to investigate the effect of a new  
antiestrogen, toremifene, on human breast cancer cells grown either in  
culture or as tumors in nude mice. Methods: The growth and morphology of  
in vitro cultured cells of the human breast cancer cell line MCF-7 were  
monitored by time-lapse video. MCF-7 cells and ZR-75-1 human breast  
cancer

cells were grown as tumors in nude mice and subsequently examined by  
electron microscopy. The integrity of DNA isolated from these cells was  
determined by standard gel electrophoretic techniques. Northern blot  
hybridization analysis was used to determine the steady-state levels of  
the mRNAs for testosterone-repressed prostatic message-2 (TRPM-2),  
**tumor growth factor beta-1** (  
**TGF-beta-1**), and pS2 (a small, cysteine-rich protein of  
unknown function). Results: Time-lapse video microscopy of the cell  
cultures indicated that treatment with 7.5 mu-M toremifene for 3 days  
caused approximately 60% of the cells to exhibit morphologic  
characteristics typical of cells undergoing programmed death, or  
**apoptosis**. The number of mitoses gradually decreased to zero over  
a 3- to 4-day period. Estrogen withdrawal for the same length of time  
resulted in an approximately equal number of **apoptoses** and  
mitoses. These changes were not associated with the pattern of DNA  
fragmentation, detectable as ladders in agarose gels, that is  
characteristic of the DNA of cells undergoing **apoptosis**.  
Elevated levels of TRPM-2 and **TGF-beta-1** mRNAs were  
observed in in vitro or in vivo grown tumor cells treated with 5-10 mu-M  
toremifene. Elevated levels of TRPM-2, but not **TGF-beta**  
-1, mRNA were observed in the tumor cells after estrogen withdrawal. The  
steady-state level of pS2 mRNA in the tumor cells dropped in  
**response** to either toremifene **treatment** or estrogen  
withdrawal. Conclusion: Toremifene causes growth inhibition of  
estrogen-sensitive breast cancer cells by inducing some cells to undergo  
**apoptosis** and by inhibiting other cells from entering mitosis. The  
higher than normal amounts of TRPM-2 and **TGF-beta-1**  
protein that would likely result from the elevated levels of TRPM-2 and  
**TGF-beta-1** mRNAs measured in these cells after  
toremifene treatment may have a important role in the growth inhibition

process. Implication: **Apoptosis** as an active, targeted process provides a potential new therapeutic approach for treating breast cancer.

L10 ANSWER 57 OF 77 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC.  
ACCESSION NUMBER: 1997:136261 BIOSIS  
DOCUMENT NUMBER: PREV199799435464  
TITLE: **Apoptosis** related **markers** in prostate  
**carcinoma**: A comparison of pre- and post-radiation  
therapy biopsies.  
AUTHOR(S): Schneider, C. (1); Grignon, D.; Sakr, W.; Sarkar, F.;  
Littrup, P.; Tabaczka, P.; Porter, A.; Crissman, J.;  
Forman, J.  
CORPORATE SOURCE: (1) Harper Hosp., Karmanos Cancer Inst., Detroit, MI USA  
SOURCE: Laboratory Investigation, (1997) Vol. 76, No. 1, pp. 89A.  
Meeting Info.: Annual Meeting of the United States and  
Canadian Academy of Pathology Orlando, Florida, USA March  
1-7, 1997  
ISSN: 0023-6837.  
DOCUMENT TYPE: Conference; Abstract  
LANGUAGE: English

L10 ANSWER 72 OF 77 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC.  
ACCESSION NUMBER: 1995:185668 BIOSIS  
DOCUMENT NUMBER: PREV199598199968  
TITLE: **Markers** for differentiation and **apoptosis**  
as intermediate endpoints for the development of lung  
**cancer**.  
AUTHOR(S): Zhang, H. (1); Yousem, S. A.; Elder, E.; Whiteside, T.;  
Levitt, M. L.  
CORPORATE SOURCE: (1) Med. Coll. Pennsylvania-Allegheny Campus, Univ.  
Pittsburgh, Pittsburgh, PA USA  
SOURCE: Proceedings of the American Association for Cancer  
Research  
Annual Meeting, (1995) Vol. 36, No. 0, pp. 249.  
Meeting Info.: Eighty-sixth Annual Meeting of the American  
Association for Cancer Research Toronto, Ontario, Canada  
March 18-22, 1995  
ISSN: 0197-016X.  
DOCUMENT TYPE: Conference  
LANGUAGE: English

ACCESSION NUMBER: 1998:321537 BIOSIS

DOCUMENT NUMBER: PREV199800321537

TITLE: The extent of proliferative and apoptotic activity in intraductal and invasive ductal breast **carcinomas** detected by Ki-67 labeling and terminal deoxynucleotidyl transferase-mediated digoxigenin-11-dUTP nick end

labeling.

AUTHOR(S): Shen, Kuo-Liang (1); Harn, Horng-Jyh; Ho, Li-Ing; Yu, Cheng-Ping; Chiu, Shao-Chih; Lee, Wei-Hwa

CORPORATE SOURCE: (1) Dep. General Surg., Tri-Serv. General Hosp., No. 8, Sec. 3, Ting-chow Rd., Taipei Taiwan

SOURCE: Cancer, (June 15, 1998) Vol. 82, No. 12, pp. 2373-2381.

ISSN: 0008-543X.

DOCUMENT TYPE: Article

LANGUAGE: English

AB BACKGROUND. The balance among cell proliferation, cell differentiation, and cell death determines the cell number in a population as well as the size or even the stage of a **tumor**. Thus, to improve our understanding of the pathogenesis of **neoplasms**, it is important to investigate the regulation of both cell proliferation and cell death. METHODS. This study examined the occurrence of apoptosis and

proliferative

capacity in 46 breast **carcinomas**: 20 intraductal **carcinomas** (ductal **carcinomas** in situ (DCIS)) and 26 infiltrative ductal **carcinomas** (IDC). Terminal deoxynucleotidyl transferase-mediated digoxigenin-11-dUTP nick end labeling (TUNEL) and immunostaining with the Ki-67 **antibody** were used in the examination. A ladder of DNA fragments induced by apoptosis was demonstrated by means of DNA agarose gel electrophoresis in 10 of the available TUNEL positive and negative samples. RESULTS. The results were correlated with p53, bcl-2, estrogen receptor (ER), and progesterone receptor (PR) protein expression, which would suggest association with apoptosis by immunohistochemistry. The apoptosis and proliferation of

each

**cancer** were expressed as the number of **tumor** cells undergoing apoptosis and proliferation per 1000 **tumor** cells. The extent of apoptosis was more frequently observed in DCIS than in IDC

(21.9

+/- 6.8 vs. 4.0 +/- 0.9,  $P < 0.001$ ), and the proliferation activity was significantly higher in IDC than in DCIS (16.8 +/- 6.5 vs. 3.5 +/- 0.8,  $P < 0.006$ ). Apoptosis associated with MIB-1 positive cells and TUNEL labeling was significantly higher in IDC than in DCIS (3.26 vs. 0.42,  $P = 0.001$ ). In DCIS, apoptosis was correlated with p53 ( $r = 0.663$ ,  $P = 0.005$ ), and

p53

had a reverse correlation with bcl-2 ( $r = 0.620$ ,  $P = 0.018$ ). Moreover, bcl-2 expression was associated with ER ( $P = 0.028$ ) and PR ( $P = 0.005$ ) expression in both DCIS and IDC. CONCLUSIONS. The results of this study show that a higher degree of apoptosis and lower proliferation activity

in

intraductal **carcinoma** result in a steady-state, self-renewing condition in which net growth of the **tumor** is rare. The results also indicate that apoptosis was altered by the expression of p53, bcl-2, ER, and PR.

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ACCESSION NUMBER: 1999:34448 BIOSIS  
DOCUMENT NUMBER: PREV199900034448  
TITLE: The HER-2/neu oncogene in breast cancer: Prognostic factor,  
predictive factor, and target for therapy.  
AUTHOR(S): Ross, Jeffrey (1); Fletcher, Jonathan A.  
CORPORATE SOURCE: (1) Dep. Pathol., Albany Med. Coll., Mail Code 81, 47 New  
Scotland Ave., Albany, NY 12208 USA  
SOURCE: Stem Cells (Miamisburg), (1998) Vol. 16, No. 6, pp.  
413-428.  
ISSN: 1066-5099.  
DOCUMENT TYPE: Article  
LANGUAGE: English

AB The HER-2/neu oncogene encodes a transmembrane tyrosine kinase receptor  
with extensive homology to the epidermal growth factor receptor.

HER-2/neu

has been widely studied in breast cancer. In this review, the association  
of HER-2/neu gene and protein abnormalities studied by Southern and slot  
blotting, immunohistochemistry, enzyme immunoassays, and fluorescence in  
situ hybridization with prognosis in breast cancer is studied in depth by  
review of a series of 47 published studies encompassing more than 15,000  
patients. The relative advantages of gene amplification assays and  
frozen/fresh tissue immunohistochemistry over paraffin section  
immunohistochemistry are discussed. The significance of HER-2/neu  
overexpression in ductal carcinoma in situ and the HER-2/neu status in  
uncommon female breast conditions and male breast cancer are also  
considered. The potential value of HER-2/neu status for the prediction of  
response to therapy in breast cancer is presented in the light of a

series

of recently published studies showing a range of impact on the outcome of  
patients treated with hormonal, cytotoxic, and radiation therapies. The  
evidence that HER-2/neu gene and protein abnormalities in breast cancer  
predict resistance to tamoxifen therapy and relative sensitivity to  
chemotherapy regimens including **adriamycin** is presented. The  
review will also evaluate the status of serum-based testing for  
circulating the HER-2/neu receptor protein and its ability to predict  
disease outcome and therapy response. In the final section, the review  
will briefly present preliminary data concerning the use of

antibody-based

therapies directed against the HER-2/neu protein and their potential to  
become a new modality for breast cancer treatment. The recently presented  
phase III clinical trial evidence that systemic administration of  
anti-HER2 antibodies (**Herceptin**), alone and in  
**combination** with cytotoxic chemotherapy in patients with HER-2/neu  
overexpressing primary tumors, can increase the time to recurrence and  
overall response rates in metastatic breast cancer is reviewed.